

ADVANCED PHYSICS for Teachers

Dates: June 19 - 23, 2006

Location: Weber State University

Credit: (3 credit hr / MEd 6670; Physics for Secondary Teachers)

Instructor: Dr. Adam Johnston, Associate Professor of Physics, Weber State University;
Ph.D., Science Education; M.S., Physics, University of Utah

Registration Fee & Deposit: \$250 registration fee; \$40 deposit payable to "Weber State University".

Send deposit to: Dr. Sharon Ohlhorst, Director Center For Science & Mathematics Education,
Weber State University, 2509 University Circle, Ogden, UT 84408-2509. Phone: 801-626-6160;
Email: sohlhorst@weber.edu .

Course Description:

This intensive workshop will investigate physics concepts, their historical development, and how laboratory and inquiry-based investigations best model both the physical phenomena and how authentic science operates. Although the concepts to be covered will be the same as those in the physics core, this course will engage in these topics in greater depth than typical coursework. (Enrollment in this course requires previous physics coursework equivalent to "Physics for Scientists and Engineers", PHYS 2210/2220.) Participants will develop an understanding of the historical and experimental background for concepts in the physics core. Hands-on laboratory materials will be constructed and made available for teachers to bring back to their classrooms. Class meets 8:30 am to 4:00 pm each day, with homework each night and additional work to be completed at home during the two weeks following the workshop. Class sessions will be comprised of group work, interactive class discussions, and the development of course curricula, lessons, and assessments.



2006 Science Professional Development Registration Form

(Duplicate as Necessary)

Workshop Contact:

Mail/Fax to:

Sessions fill on a first-come basis. Register early to secure your place.

Workshop Title	Date	Location	Registration Fee
			\$250.00

Contact Information:

Teacher: _____
District: _____
School: _____
Grade Level/Subject: _____
Home Address: _____

City: _____ Zip: _____
Home phone: _____
School phone: _____
Fax number: _____
e-mail: _____

Commitment to Attend & District Approval:

I understand that I am committing to this workshop and I will cancel at least two weeks prior to the workshop if I am unable to attend.

Teacher Signature: _____

Signature of Principal or District Representative indicates source of registration payment for workshop:

☐ **PERSONAL** Check # _____ enclosed **OR**

☐ **SCHOOL** _____ **OR**
Principal

☐ **DISTRICT** _____
District Representative

**Please contact your school or district to determine if approval is needed prior to registration.*

☐ Bill to this Address

Return this completed registration form and your refundable deposit check to the workshop contact listed above.

A separate registration form must be submitted for each workshop you plan to attend.